

CERTIFIED TRUE COPY

BY: [Signature]

IN THE CIRCUIT COURT OF THE STATE OF OREGON FOR KLAMATH COUNTY

In the Matter of the Estate of)

Case No. 950327XV

HARRISON S. WYANT,)

AFFIDAVIT OF CLAIMING
SUCCESSOR OF SMALL ESTATE
OF TESTATE ESTATE

Deceased.)

STATE OF WASHINGTON)

County of Chelan)

ss:

I, Audrey Wyant, being first duly sworn, say:

I am a Claiming Successor, as defined in ORS 114.505(1), to a portion of the Decedent's estate. I am hereinafter referred to as "Affiant." This Affidavit is hereinafter referred to as "Affidavit." This Affidavit is made pursuant to ORS 114.505-114.560.

1.

The following information is given with regard to the Decedent:

- (a) Name: Harrison S. Wyant
- (b) Age: 74
- (c) Domicile: 623 Sunset Avenue, Wenatchee, WA 98801
- (d) Post Office Address: None
- (e) Social Security No.: 544-05-5039

1 - Affidavit of Claiming Successor of Small Estate of Testate Estate

After recording
return to

LEE D. KERSTEN, OSD#2300
260 COUNTRY CLUB ROAD
SUITE 210
EUGENE, OR 97401-2231
(503)343-4312

2.

The Decedent died on March 25, 1995, at 623 Sunset Avenue, Wenatchee, Washington; a certified copy of the Decedent's death certificate is attached as Exhibit 1.

3.

The Decedent's property subject to administration in Oregon consists of the following:

(a) Real property and value thereof:

All that certain property described as the East half of the Southeast quarter of the Northwest quarter of the Southwest quarter (E $\frac{1}{2}$ SE $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$) and the East half of the Northeast quarter of the Southwest quarter of the Southwest quarter (E $\frac{1}{2}$ NE $\frac{1}{4}$ SW $\frac{1}{4}$ SW $\frac{1}{4}$) of Section twenty five, Township 24 South, Range 8 East of the Willamette Meridian

Subject to:

Easements and conditions of record

Reserving unto the Grantors an easement of fifteen (15) feet, with the right of dedication for road purposes, over the Northerly, the Westerly and the Southerly boundaries of said property.

\$11,240

4.

No application or petition for the appointment of a personal representative has been granted in Oregon.

5.

The Decedent died testate and a certified true copy of the Decedent's Will is attached as Exhibit 2.

6.

The Decedent's heir and the heir's last address known to the Affiant are:

///

2 - Affidavit of Claiming Successor of Small Estate of Testate Estate

1	Name	Address
2	Audrey L. Wyant	623 Sunset Avenue
3		Wenatchee, WA 98801
4	A copy of the Will, and this Affidavit showing the date of filing,	
5	will be delivered or mailed to the heir at the last-known address.	

7.

7 The Decedent's devisee and the devisee's last address known to
8 the Affiant are:

9	Name	Address
10	Audrey L. Wyant	623 Sunset Avenue
11		Wenatchee, WA 98801

12 A copy of the Will, and a copy of this Affidavit showing the date
13 of filing, will be delivered or mailed to the devisee at the last-
14 known address.

8.

16 The interest in the Decedent's property described in this
17 affidavit to which each devisee is entitled is: 100%.

9.

19 Reasonable efforts have been made to ascertain each creditor
20 of the estate. The expenses of and claims against the estate
21 remaining unpaid or on account of which the Affiant or any other
22 person is entitled to reimbursement from the estate, including any
23 known or estimated amount thereof, and the name and address of each
24 creditor, as known to the Affiant are: None.

10.

26 The name and address of each person known to the Affiant to
27 assert a claim against the estate which the Affiant disputes and
28 the last-known or estimated amount thereof: None.

3 - Affidavit of Claiming Successor of Small Estate of Testate Estate

11.

A copy of this Affidavit showing the date of filing has been mailed or delivered to:

State of Oregon
Adult and Family Services Division
Estate Administration Section
Salem, Oregon 97310

Oregon Department of Revenue
Salem, Oregon 97310

by depositing the copy of the Affidavit in the United States Postal Service in a sealed envelope, with postage prepaid.

12.

Claims against the estate not listed herein, or in amounts larger than those listed herein, may be barred unless (a) a claim is presented to the Affiant within four months of the filing of this affidavit at the address set forth in this paragraph or (b) a personal representative of the estate is appointed within the time allowed under ORS 114.555.

13.

If there is listed one or more claims that the Affiant disputes, any such claim may be barred unless (a) a petition for summary determination is filed within four months of the filing of this affidavit; or (b) a personal representative of the estate is appointed within the time allowed under ORS 114.555.

14.

The address for the purposes of presenting a claim to the Affiant is: Audrey Wyant, c/o Lee D. Kersten, 260 Country Club Road, Suite 210, Eugene, OR 97401.

///

4 - Affidavit of Claiming Successor of Small Estate of Testate Estate

2 Any noun or verb used in this affidavit shall be construed as
3 either singular or plural as the context requires.

5 Exhibit 1 and Exhibit 2 attached hereto are each hereby made
6 a part hereof as though fully set forth at the place where
7 reference to the exhibit is made.



Subscribed and sworn to before me

Kileen Lucin
Notary Public For Washington
My commission expires: 11-27-96

18 I, Lee D. Kersten, join in this Affidavit.

22 | Subscribed and sworn to before me 7/28, 1995.

LARRY D. KIRSTEN, OSB#82300
 260 COUNTRY CLUB ROAD
 SUITE 210
 EUGENE, OR 97401-2231
 (503)345-4312

STATE OF WASHINGTON DEPARTMENT OF HEALTH

Health

CERTIFICATE OF DEATH

146

29351

LOCAL FILE NUMBER

STATE FILE NUMBER

1. NAME First: Harrison Middle: S. Last: WYANT			2. SEX (M / F) Male		3. DEATH DATE (Mo, Day, Yr) March 25, 1995	
4. AGE LAST BIRTHDAY (Yrs) 74		5. UNDER 1 YEAR MOS DAYS HOURS MRS		6. UNDER 1 DAY HOURS MRS		7. BIRTHDATE (Mo, Day, Yr) Jan 12, 1921
8. BIRTHPLACE (City, State or Foreign Country) Leona, Oregon		9. WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes / No) Yes		10. COUNTY OF DEATH Chelan		
11. CITY, TOWN OR LOCATION OF DEATH Wenatchee			12. PLACE OF DEATH—BOX FOR PLACE THEN GIVE ADDRESS OR INSTITUTION NAME 1. HOME 2. IN TRANSIT 3. LONG TERM CARE 4. HOSP. 5. NURSING HOME 6. OTHER PLACE 623 Sunset Avenue			13. SMOKING IN LAST 15 YEARS? (Yes / No) No
14. MARITAL STATUS—Married, Never Married, Widowed, Divorced (Specify) Married		15. SURVIVING SPOUSE (If wife, give maiden name) Audrey Hand		16. SOCIAL SECURITY NO. 544-05-5039		17. DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (9-12) College (1-4 or 5+) 10 -0-
18. USUAL OCCUPATION (Give kind of work done during most of working life. DO NOT USE RETIRED) Agent		19. KIND OF BUSINESS OR INDUSTRY Greyhound Bus		20. WAS DECEDENT OF Hispanic origin or descent? (Ancestry) (Specify Yes or No. If Yes, specify Cuban, Mexican, Puerto Rican, etc.) No		21. RACE (Specify) White
22. RESIDENCE—NUMBER AND STREET 623 Sunset Avenue		23. CITY/TOWN OR LOCATION Wenatchee		24. INSIDE CITY LIMITS? (Yes / No) Yes		25. COUNTY Chelan
26. LENGTH OF RES. IN CO. 18 yrs		27. STATE WA		28. ZIP CODE 98801		
29. FATHER'S NAME—FIRST, MIDDLE, LAST Benjamin Harrison Wyant			30. MOTHER'S NAME—FIRST, MIDDLE, MAIDEN SURNAME Ingred Johnson			
31. INFORMANT—NAME Mrs. Audrey Wyant			32. MAILING ADDRESS—STREET OR RFD NO., CITY OR TOWN, STATE, ZIP 623 Sunset Avenue, Wenatchee, Washington 98801			
33. DATE (Mo, Day, Yr) Mar. 28, 1995		34. CEMETERY/CREMATORY—NAME N.C.W. Crematory		35. LOCATION—CITY/TOWN, STATE East Wenatchee, Washington		
36. FUNERAL DIRECTOR SIGNATURE <i>[Signature]</i>		37. NAME OF FACILITY Telford's Chapel of the Valley		38. ADDRESS OF FACILITY 711 Grant Road East Wenatchee, WA 98802		
39. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND WAS DUE TO THE CAUSE(S) STATED. SIGNATURE AND TITLE <i>[Signature]</i> X			40. DATE SIGNED (Mo., Day, Yr) 3-27-95			
41. HOUR OF DEATH (24 Hrs.) 0300			42. NAME AND TITLE OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print) Stuart Freed, M.D.; 820 N. Chelan Ave., Wenatchee, WA 98801			
43. ON THE BASIS OF EXAMINATION AND/OR INVESTIGATION, IN MY OPINION DEATH OCCURRED AT THE TIME, DATE AND PLACE AND WAS DUE TO THE CAUSE(S) STATED. SIGNATURE AND TITLE <i>[Signature]</i> X			44. DATE SIGNED (Mo., Day, Yr) 3-27-95			
45. HOUR OF DEATH (24 Hrs.) 0300			46. PRONOUNCED DEAD (Mo., Day, Yr) 3-27-95			
47. HOUR PRONOUNCED DEAD (24 Hrs.) 0300			48. NAME AND ADDRESS OF CERTIFIER—PHYSICIAN, MEDICAL EXAMINER OR CORONER (Type or Print) Stuart Freed, M.D.; 820 N. Chelan Ave., Wenatchee, WA 98801			
49. ME/CORONER FILE NUMBER			50. ENTER THE DISEASES, INJURIES, OR COMPLICATIONS WHICH CAUSED THE DEATH:			
IMMEDIATE CAUSE (Final disease or condition resulting in death) Metastatic Prostate Carcinoma			INTERVAL BETWEEN ONSET AND DEATH			
DO NOT ENTER THE MODE OF DYING, SUCH AS CARDIAC OR RESPIRATORY ARREST, SHOCK, OR HEART FAILURE. LIST ONLY ONE CAUSE ON EACH LINE. Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury which initiated events resulting in death) LAST.			INTERVAL BETWEEN ONSET AND DEATH			
DUE TO, OR AS A CONSEQUENCE OF:			INTERVAL BETWEEN ONSET AND DEATH			
DUE TO, OR AS A CONSEQUENCE OF:			INTERVAL BETWEEN ONSET AND DEATH			
DUE TO, OR AS A CONSEQUENCE OF:			INTERVAL BETWEEN ONSET AND DEATH			
DUE TO, OR AS A CONSEQUENCE OF:			INTERVAL BETWEEN ONSET AND DEATH			
51. OTHER SIGNIFICANT CONDITIONS—CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN ABOVE			52. AUTOPSY? (Yes / No) No			
53. WAS CASE REFERRED TO MEDICAL EXAMINER OR CORONER? (Yes / No) Yes			54. ACC. SUICIDE, HOMICIDE, UNDET., OR PENDING INVEST. (Specify)			
55. INJURY DATE (Mo, Day, Yr)			56. HOUR OF INJURY (24 Hrs.)			
57. DESCRIBE HOW INJURY OCCURRED:			58. INJURY AT WORK? (Yes / No)			
59. PLACE OF INJURY—AT HOME, FARM, STREET, FACTORY, OFFICE, BLDG., ETC. (Specify)			60. LOCATION—STREET OR RFD NO., CITY/TOWN, STATE			
61. RECORD AMENDMENT (Request or use only) ITEM DOCUMENTARY EVIDENCE EXHIBIT 1			62. REGISTRAR SIGNATURE <i>[Signature]</i>			
63. DATE RECEIVED (Mo., Day, Yr.) MAR 28 1995			64. DATE RECEIVED (Mo., Day, Yr.) MAR 28 1995			

FOR INSTRUCTIONS SEE BACK AND HANDBOOK

PAGE

1 of 1

DOH 110-008 (Rev. 7/91) (Formerly DSHS 9-150)

DOH 01-003 (5/92)

A COPIED COPY OF THE RECORD ON FILE WITH CENTER FOR HEALTH STATISTICS. COPIED COPIES MUST BE MADE OF THIS OFFICIAL COPY.

29351-A

17005

STATE OF TEXAS

CERTIFIED

Francis J. Collins

FRANCIS J. COLLINS, M.D.
HEALTH OFFICER AND REGISTRAR
DALLAS-DOUGLAS HEALTH DISTRICT

MAR 28 1995

DO NOT DESTROY

17005

BB495466

304

CERTIFIED TRUE COPY

BY: 

1 LAST WILL AND TESTAMENT
2 OF
3 HARRISON SIGFREID WYANT
4

5 I, HARRISON SIGFREID WYANT, of Wenatchee, Chelan
6 County, Washington, declare this to be my Last Will and Testa-
7 ment, and revoke all former Wills and Codicils.
8

9 .. ARTICLE I
10

11 Identification Of Family
12

13 My immediate family now consists of my wife, AUDREY
14 LaDONNA WYANT; my children, RICHARD HARRISON WYANT, LeROY DONALD
15 WYANT and TANIA GAY WYANT, all of legal age; and my grandchil-
16 dren, LeROY DONALD WYANT II, born April 13, 1967, JOAN MARIE
17 WYANT, born May 14, 1968, and NATALE ANGELINA WYANT, born
18 December 17, 1973. I have no deceased children. Except as
19 provided below, I make no provision in this Will for any of my
20 children who survive me, whether named herein or hereafter born
21 or adopted, nor for the descendants of any child who does not
22 survive me.

23 ARTICLE II
24

25 Debts

26 I hereby direct and order that all just debts for which
27 proper claims are filed against my estate and the expenses of my
28 last illness and funeral be paid by my Personal Representative as
29 soon after my death as is practicable; provided, however, that
30 this direction shall not authorize any creditor to require
31

Last Will And Testament
Of HARRISON SIGFREID WYANT

- 1 -

JEFFENS, DANIELSON, SOHN & AYLWARD, P.S.
ATTORNEYS AT LAW

317 N. Mission, P.O. Box 1600
Telephone (509) 662 3605
Wenatchee, Washington 98801

EXHIBIT 2

PAGE 1 of 10

1 payment of any debt or obligation prior to its normal maturity in
2 due course.

3
4 ARTICLE III

5 Specific Devises And Bequests

6 A. I give to my spouse, AUDREY LaDONNA WYANT, pro-
7 vided my spouse survives me by sixty (60) days:

8 1. All of my interest in and title to any real
9 property used by us either for all year or for seasonal residence
10 purposes, and my interest in any policy of property or liability
11 insurance covering such property.

12 2. My community interest in any bank or savings
13 and loan account held in the name of my spouse alone and any
14 U. S. Savings Bonds registered in her name alone.

15 3. Any interest I may have in and to any policy
16 of insurance upon her life or the lives of our children.

17 4. All of my tangible personal property not
18 otherwise disposed of by the Memorandum referred to below,
19 including, but not limited to, my clothing, jewelry and personal
20 effects, household furniture and furnishings, silverware and
21 silver service, books, paintings, pictures, sporting equipment,
22 boats and automobiles held for personal use, and my interest in
23 any property or liability policy covering such items.

24 B. I hereby make specific reference to a written
25 Memorandum (hereinafter the "Memorandum") signed by me or in my
26 handwriting, or both, which directs disposition of certain of my
27 remaining tangible personal property owned by me at my death. I
28 have made this Memorandum in accordance with, and as authorized
29 by, the laws of the State of Washington, RCW 11.12.260 (Laws of
30 1984, Chapter 149, Section 7), which laws (and all amendments
31

Last Will And Testament
Of HARRISON SIGFREID WYANT

- 2 -

JEFFERS, DANIELSON, SONN & AYLWARD, P.S.
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Telephone (509) 662-3685
Wenatchee, Washington 98801

EXHIBIT 2
PAGE 2 of 10

thereto) are to govern for all purposes hereunder and are hereby fully incorporated by reference. I understand such a writing shall not be effective unless:

1. an unrevoked Will refers to the writing (and I hereby refer to said writing);

2. the writing is either in my handwriting or is signed by me; and

3. the writing describes the items and recipients of the tangible personal property with reasonable certainty.

I further understand that the writing may be written or signed before or after the execution of my Last Will and Testament and need not have significance apart from its effect upon the dispositions of property made by my Will. I also understand that I may make subsequent handwritten or signed changes to any such writing. As used in this Article II, the term "tangible personal property" means articles of personal or household use or ornaments; for example, furniture, furnishings, automobiles, boats, airplanes, and jewelry, as well as precious metals in any tangible form; for example, bullion or coins. The term includes articles even if held for investment purposes and encompasses tangible property that is not real property. The term does not include mobile homes or intangible property; for example, money that is normal currency or normal legal tender, evidences of indebtedness, bank accounts or other monetary deposits, documents of title, or securities.

C. If my spouse does not survive me by sixty (60) days, I give the property described in paragraph A.4 above (hereinafter the "Personal Property"), not otherwise disposed of by the Memorandum referred to above, to my children who survive me, in equal shares, as follows:

Last Will And Testament
Of HARRISON SIGFREID WYANT

- 3 -

JEFFERS, DANIELSON, SONN & AYLWARD, P.S.
ATTORNEYS AT LAW
317 N. Mission, P.O. Box 1680
Telephone (509) 662 3605
Wenatchee, Washington 98801

EXHIBIT 2
PAGE 3 of 10

1 1. If any articles of the Personal Property pass
2 to more than one child of mine, such children shall have ninety
3 (90) days from the date of my death to divide such articles of
4 the Personal Property among themselves. If such children do not
5 agree among themselves to a division within the said period, or
6 if any child of mine is unable to make such choice because he or
7 she is under legal disability, I give my Personal Representative
8 authority to make an equitable division of such articles and any
9 proceeds from the sale thereof among such children. In so doing,
10 my Personal Representative may sell any or all of such articles
11 of the Personal Property to one or more of my beneficiaries or to
12 others.

13 2. With respect to the share of the Personal
14 Property of any child under a legal disability, my Personal
15 Representative is given the authority in its sole discretion to:

16 a. deliver all or any part to said child;
17 b. place assets such as jewelry in safe-
18 keeping for the child and pay fees incurred;

19 c. sell all or any part and distribute the
20 proceeds to the child or add them to any trust fund for his or
21 her benefit; or

22 d. deliver all or any part to any Trustee
23 named hereunder, or Custodian under the Uniform Gifts to Minors
24 Act, or the guardian of the child's person or the person with
25 whom the child resides; or

26 e. deliver all or any part to the person
27 serving hereunder as Personal Representative or Trustee, as Cus-
28 todian under the Uniform Gifts to Minors Act.

29 3. The receipt of such Trustee, Custodian,
30 personal guardian or person shall be a complete discharge of my
31 Personal Representative for the property delivered.

Last Will And Testament
Of HARRISON SIGFREID WYANT

- 4 -

JEFFERS, DANIELSON, SONN & AYLWARD, P.S.
ATTORNEYS AT LAW
317 N. Mission, P.O. Box 1608
Telephone (509) 662-3605
Wenatchee, Washington 98801

EXHIBIT 2

PAGE 4 of 10

1 4. I give my interest in any insurance on the
2 life of one of my children to such insured child.

3
4 ARTICLE IV

5 Provision For Spouse

6 I give, devise, and bequeath unto my spouse, AUDREY
7 LaDONNA WYANT, provided my spouse survives me by sixty (60) days,
8 all the rest, residue and remainder of my estate, whether real or
9 personal, and wheresoever situated.

10
11 ARTICLE V

12 " Alternate Provisions

13 In the event that my spouse does not survive me by
14 sixty (60) days, then my residuary estate shall be divided into
15 three (3) equal shares. Each share shall be distributed as set
16 forth below.

17 A. One (1) share I give to my son, RICHARD HARRISON
18 WYANT, and my granddaughter, JOAN MARIE WYANT, in the following
19 proportions:

20 1. I give seventy-five percent (75%) of said
21 share to my son, RICHARD HARRISON WYANT, provided he shall have
22 survived me by sixty (60) days; otherwise, to my granddaughter,
23 JOAN MARIE WYANT.

24 2. I give twenty-five percent (25%) of said
25 share to my granddaughter, JOAN MARIE WYANT, provided she shall
26 have survived me by sixty (60) days; otherwise, to her father,
27 RICHARD HARRISON WYANT.

28 3. If neither RICHARD HARRISON WYANT nor JOAN
29 MARIE WYANT shall have survived me by sixty (60) days, then the
30 share they would have otherwise taken under this Will shall be
31

Last Will And Testament
OF HARRISON SIGFREID WYANT

- 5 -

JEFFERS, DANIELSON, SONN & AYLWARD, P.S.
ATTORNEYS AT LAW
317 N. Mission, P.O. Box 1688
Telephone (509) 662-3685
Wenatchee, Washington 98801

EXHIBIT 2
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1 added to the balance of my residuary estate and shall be
2 distributed as a part thereof.

3 B. One (1) share I give to my son, LeROY DONALD
4 WYANT, and my grandson, LeROY DONALD WYANT II, in the following
5 proportions:

6 1. I give seventy-five percent (75%) of said
7 share to my son, LeROY DONALD WYANT, provided he shall have
8 survived me by sixty (60) days; otherwise, to my grandson, LeROY
9 DONALD WYANT II.

10 2. I give twenty-five percent (25%) of said
11 share to my grandson, LeROY DONALD WYANT II, provided he shall
12 have survived me by sixty (60) days; otherwise, to his father,
13 LeROY DONALD WYANT.

14 3. If neither LeROY DONALD WYANT nor LeROY
15 DONALD WYANT II shall have survived me by sixty (60) days, then
16 the share they would have otherwise taken under this Will shall
17 be added to the balance of my residuary estate and shall be
18 distributed as a part thereof.

19 C. One (1) share I give to my daughter, TANIA GAY
20 WYANT, and my granddaughter, NATALE ANGELINA WYANT, in the
21 following proportions:

22 1. I give seventy-five percent (75%) of said
23 share to my daughter, TANIA GAY WYANT, provided she shall have
24 survived me by sixty (60) days; otherwise, to my granddaughter,
25 NATALE ANGELINA WYANT.

26 2. I give twenty-five percent (25%) of said
27 share to my granddaughter, NATALE ANGELINA WYANT, provided she
28 shall have survived me by sixty (60) days; otherwise, to her
29 mother, TANIA GAY WYANT.

30 3. If neither TANIA GAY WYANT nor NATALE
31 ANGELINA WYANT shall have survived me by sixty (60) days, then

Last Will And Testament
Of HARRISON SIGFREID WYANT

- 6 -

JEFFERS, DANIELSON, SONN & AYLWARD, P.S.
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317 N. Mission, P.O. Box 1688
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Wenatchee, Washington 98801

EXHIBIT 2
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1 the share they would have otherwise taken under this Will shall
2 be added to the balance of my residuary estate and shall be
3 distributed as a part thereof.

4
5 ARTICLE VI

6 Appointment Of Personal Representative

7 A. I hereby appoint my spouse, AUDREY LaDONNA WYANT,
8 to act as Personal Representative of this my Last Will and
9 Testament, but if she shall be unable or unwilling so to act, or
10 if, having accepted, she later resigns, or becomes unable to
11 perform, or is removed, I appoint my son, RICHARD HARRISON WYANT,
12 of Cheshire, Oregon, as my Personal Representative, but if he
13 shall be unable or unwilling so to act, or if, having accepted,
14 he later resigns, or becomes unable to perform, or is removed, I
15 appoint my daughter, TANIA GAY WYANT, of Ellensburg, Washington,
16 as my Personal Representative, with full power to mortgage,
17 encumber, lease, sell, exchange and convey, without notice or
18 confirmation, any assets of my estate, real or personal, at such
19 prices and terms as to my Personal Representative may seem just
20 and to advance funds and borrow money, secured or unsecured, from
21 any source. Further, the Personal Representative may make
22 distributions in cash or in kind or both, in shares which may be
23 composed differently, and may do so without regard to the income
24 tax basis of specific property allocated to any beneficiary. I
25 authorize my Personal Representative to appoint an ancillary
26 Personal Representative or agent if such should become necessary
27 or advisable in the judgment of my Personal Representative.

28 B. My Personal Representative above-named need not
29 give bond, in any jurisdiction. My estate shall be administered
30 by my above-named Personal Representative without the intervention
31

Last Will And Testament
Of HARRISON SIGFREID WYANT

- 7 -

JEFFERS, DANIELSON, SONN & AYLWARD, P.S.
ATTORNEYS AT LAW
317 N. Mission, P.O. Box 1608
Telephone 15091 662-3685
Wenatchee, Washington 98801

EXHIBIT 2
PAGE 7 of 10

1 of any court and with all powers granted herein and by law to a
2 personal representative acting with nonintervention powers.

3 C. The powers given to my Personal Representative may
4 be exercised whether or not necessary for the administration of
5 my estate.

6
7 ARTICLE VII

8 Custodianship

9 Should there be any distributee who is to take under
10 this Will and who, at the time of said distribution, is under
11 eighteen (18) years of age, and no other provision has been made
12 under this Will as to how the property shall be held, managed and
13 distributed for and on behalf of such distributee, then the Per-
14 sonal Representative shall deliver that distributee's share to
15 the distributee's natural or adoptive mother as custodian under
16 the Washington Uniform Gift To Minors Act. Should the distrib-
17 utee's natural or adoptive mother not have survived at the time
18 of said distribution, then the distributee's natural or adoptive
19 father shall serve as custodian under the Washington Uniform Gift
20 To Minors Act.

21
22 ARTICLE VIII

23 Taxes

24 My Personal Representative shall pay all estate, inher-
25 itance and succession taxes assessed by reason of my death,
26 whether attributable to property passing under this Will or out-
27 side it, from the residue of my estate disposed of by this Will.
28 I waive for my estate all rights of reimbursement from the bene-
29 ficiaries for any such payments.

30
31
Last Will And Testament
Of HARRISON SIGFREID WYANT

- 8 -

JEFFERS, DANIELSON, SONN & AYLWARD, P.S.
ATTORNEYS AT LAW
317 N. Mission, P.O. Box 1688
Telephone (509) 662 3685
Wenatchee, Washington 98801

EXHIBIT 2
PAGE 8 of 10

IN WITNESS WHEREOF, I have hereto set my hand this

23 day of Dec, 1988.

Harrison Sigfreid Wyant
HARRISON SIGFREID WYANT

The foregoing instrument was on the date thereof signed and published by HARRISON SIGFREID WYANT who, at said time, appeared to be of sound and disposing mind and memory, and was by him declared to be his Last Will and Testament in the presence of us who, at his request and in his presence and in the presence of each other, have hereunto set our hands as witnesses thereto this 23rd day of December, 1988.

Soja Ellington
Residing at East Wenatchee.

Dana L. Guir
Residing at Wenatchee.

Last Will And Testament
OF HARRISON SIGFREID WYANT

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Telephone (509) 662-3685
Wenatchee, Washington 98801

EXHIBIT 2
PAGE 9 of 10

AFFIDAVIT OF ATTESTING WITNESSES

STATE OF WASHINGTON)
) ss.
COUNTY OF CHELAN)

Sonja Ellington and Donna L. Zier , the undersigned, each being of lawful age and a competent witness and each being an attesting witness on the Last Will and Testament of HARRISON SIGFREID WYANT attached hereto, and at the request of the testator each, being first duly sworn, on oath deposes and says that:

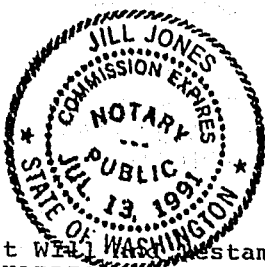
I am over the age of eighteen years. I knew the said testator on this date, also being the date of his said Last Will and Testament, and am one of the subscribing witnesses to said instrument.

The said instrument was executed and signed by the said testator on this date at Wenatchee, in the County of Chelan, State of Washington, in the presence of myself, and the said testator thereupon published the said instrument as and declared the same to be the Last Will and Testament of the said testator and requested me in attestation thereof to subscribe my name as a witness thereto. And I then and there in the presence of the said testator subscribed my name as a witness to the said instrument.

At the time of executing the said instrument, the said testator was over the age of eighteen years, was of sound and disposing mind and memory, and was not acting under duress, menace, fraud, undue influence or misrepresentation.

Sonja Ellington
Residing at East Wenatchee
Donna L. Zier
Residing at Wenatchee

SIGNED AND SWORN TO before me this 20th day of Dec., 1988, by Sonja Ellington and Donna L. Zier



Jill Jones
NOTARY PUBLIC, State of Washington.

My Commission Expires 7/13/91

EXHIBIT 2

Last Will and Testament
Of HARRISON SIGFREID WYANT
FLA

PAGE 10

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JEFFERS, DANIELSON, SONN & AYLWARD, P.S.
ATTORNEYS AT LAW
317 N. Mission, P.O. Box 1688
Telephone (509) 662-3685
Wenatchee, Washington 98801

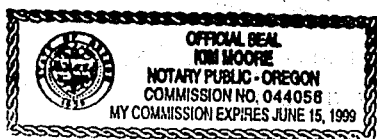
STATE OF OREGON)

ss.

County of Lane)

29362

I, Kim Moore, certify this 11th day of July, 1995, that the foregoing Last Will and Testament of Harrison Sigfreid Wyant is a true and correct copy of the original in the possession of Audrey Wyant.



Kim Moore
Notary Public for Oregon
My Commission Expires: 6/15/99

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of _____ the 27 day
of Oct. A.D., 19 95 at 11:20 o'clock A. M., and duly recorded in Vol. M95
of Deeds on Page 29346.

FEE \$115.00

Bernetha G. Letsch, County Clerk
By Annette Mueller